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CERTIFICATE OF TRANSMISSION/MAILING

Ref. No.: 11984.5

I hereby certify that this correspondence is being facsimile transmitted to the USPTO at (570) 273-8300 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 9, 2005.

Ken Horton
Ken Horton

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005		Docket Number (Optional) 11984.5	
Application Number: 10/723,015		Filed: November 26, 2003	
For: CLAMP IDENTIFICATION MARKER			
Art Unit: 3611		Examiner: Cassandra Davis	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate for below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60 <u>\$60.00</u>
<input type="checkbox"/>	Two month (37 CFR 1.17(a)(2))	\$450	\$225 \$
<input type="checkbox"/>	Three month (37 CFR 1.17(a)(3))	\$1020	\$510 \$
<input type="checkbox"/>	Four month (37 CFR 1.17(a)(4))	\$1590	\$795 \$
<input type="checkbox"/>	Five month (37 CFR 1.17(a)(5))	\$2160	\$1080 \$
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input checked="" type="checkbox"/> A check that includes the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0843</u> .			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>39,481</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration Number <u>39,481</u>			
<i>Ken Horton</i>		September 9, 2005	
Kenneth E. Horton		Date	
		(801) 321-4897	
		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of _____ forms are submitted.			

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